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SERIAL NUMBER	FILING DATE		FIRST NAME	APPLICANT		ATTORNE	Y DOCKET NO.
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Date of interview	5/3/6	9]					
Type: Telephonic	Personal (copy is gi	iven to applica	int Pepplicant	's representative).			
xhibit shown or demon	estration conducted:	Yes No. If	yes, brief descript	tion:EXA	mrles	OF H	ouscitor D
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AND SEESE	OWAL CARE	PRODUCTS	AS A SI	BUS FOR	DISCUSSIO	NOF	DIFFRANCE
Agreement Was read	Ched with respect to som	e or all of the claim	ns in question.	☐ was not reach	ed.		
Claims discussed:		ALL					
dentification of prior ar	t discussed:		OF 1	efco RD			
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Description of the genera	al nature of what was agr	eed to if an agreem	ent was reached,	or any other com	ments: A	rucdor	<i>></i> 5
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A fuller description, if	CHOLD PRODUCT F (Lu DING U necessary, and a copy of	$CS \leftarrow FOR$ of the amendments	i, if available, whi	ch the examiner	ARG. agreed would ren	der the claim	s allowable must be
ttached. Also, where no	copy of the amendmen	ts which would rend	der the claims allo	wabie is available	e, a summary there	or must be at	tacnea.)
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It is not necessary	for applicant to provide	e a separate record o	of the substance o	f the interview.			
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